

**Great Lakes Water Quality/
Limnology Survey
Staffing Schedule Form**

Appendix C

Original, March 2002

Great Lakes Water Quality / Limnology Survey Staffing Schedule

Survey: _____

| Shift Dates From: To: | Proposed Staffing | | Self-Certification Form Complete | Actual Staffing | Self-Certification Form Complete |
|-------------------------------|-----------------------------|--|-------------------------------------|-----------------|-------------------------------------|
| | Chief Scientist: | | | | |
| | Shift Supervisor: | | | | |
| | Participating Scientist(s): | | | | |
| | | | | | |
| | Chief Scientist: | | | | |
| | Shift Supervisor: | | | | |
| | Participating Scientist(s): | | | | |
| | | | | | |
| | Chief Scientist: | | | | |
| | Shift Supervisor: | | | | |
| | Participating Scientist(s): | | | | |
| | | | | | |
| | Chief Scientist: | | | | |
| | Shift Supervisor: | | | | |
| | Participating Scientist(s): | | | | |
| | | | | | |

I have verified that the above named staff have the applicable technical and safety qualifications necessary to participate in the Great Lakes Water Quality Survey.

Name: _____ Date: _____
 Paul Horvatin, Monitoring Indicators and Reporting Branch Chief